

## "FEE ADDRESS" INDICATION FORM

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Request for Customer Number (PTO/SB/125) attached hereto  
in the following listed application(s) for which the Issue Fee has been paid for patent(s).

PATENT NUMBER (if known)	APPLICATION NUMBER

Completed by (check one):



Applicant/Inventor

  
Signature



Attorney or Agent of record 20632  
(Reg. No.)

Marvin E. Jacobs

Typed or printed name



Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed.  
(Form PTO/SB/96)

805/230-1350

Requester's telephone number



Assignee recorded at Reel \_\_\_\_\_ Frame \_\_\_\_\_

6-16-2006  
Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.



\* Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.363. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 5 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop M Correspondence, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**CHANGE OF  
CORRESPONDENCE ADDRESS**  
*Application*Address to:  
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Application Number	10/763,091
Filing Date	01/21/2004
First Named Inventor	Sanders
Art Unit	3634
Examiner Name	Thompson
Attorney Docket Number	P006-P06229US

Please change the Correspondence Address for the above-identified patent application to:

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I am the:

- ☐ Applicant/Inventor
- ☐ Assignee of record of the entire interest.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ Attorney or Agent of record. Registration Number 20632
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number \_\_\_\_\_

Typed or Printed Name Marvin E JacobsSignature Date 6-16-2006Telephone 805-230-1350

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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